

Section V. South Phoenix

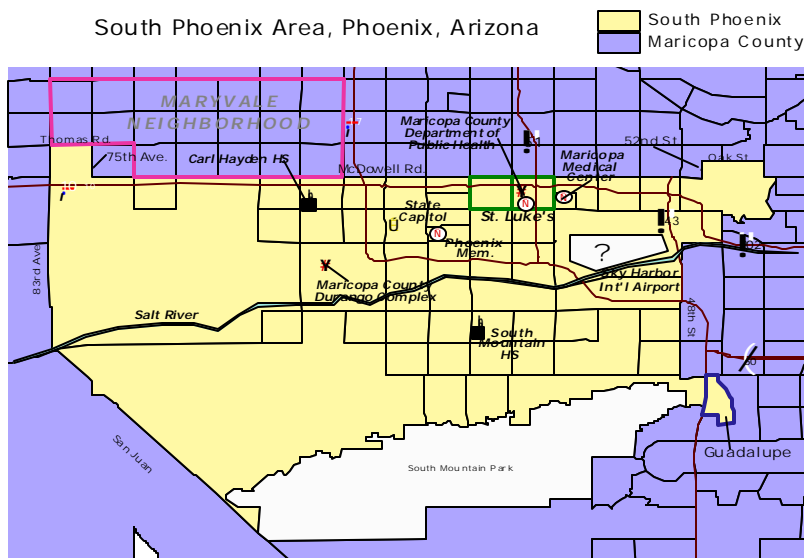
INTRODUCTION

South Phoenix is one of ten defined Health Status Areas in Maricopa County. Health Status areas were established as a means to aggregate geographic areas with similar demographic, socioeconomic, and health characteristics for the purpose of health assessments within Maricopa County. The South Phoenix Health Status Area is bordered on the south by South Mountain Park, on the north by McDowell Road, on the east by 48th Street, and on the west by 83rd Avenue (census tracts 111202-111204, 112504-116704). South Phoenix also includes a small area, census tract 320002, comprising the town of Guadalupe. See Appendix A, map 1 for a view of the placement of South Phoenix within the county.

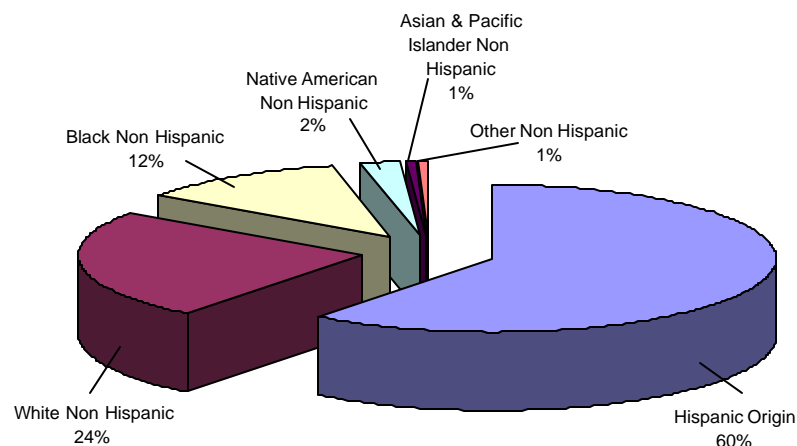
In years past, South Phoenix has had some of the poorest infant health outcomes of any of the Health Status Areas of Maricopa County. As a result, numerous efforts to improve the health of the South Phoenix community have been undertaken by a number of agencies. As part of its assessment functions, the Maricopa County Department of Public Health conducted the pilots for the Maricopa County Pregnancy Risk Assessment Monitoring System (PRAMS) and the Perinatal Periods of Risk analysis (PPOR) in South Phoenix. Descriptions of the PRAMS and PPOR studies are provided in Section III: Definitions, Data Sources, Methods, and Acronyms.

SOCIAL AND DEMOGRAPHIC PROFILE

According to the 1995 Special Census of Maricopa County¹¹, South Phoenix had a total population of 210,090, which is approximately 8% of the county's 2.5 million residents in 1995. Hispanics made up the largest proportion of the population at 60%. Whites and African Americans made up the next largest groups at 24% and 12%, respectively. See graph on next page. This is in contrast to Maricopa County as a whole, where White Non-Hispanics make up the largest proportion of the population at 72%, followed by Hispanics at 21% and Black/African Americans at 4% (data not shown).



**Total Population Distribution by Race/Ethnicity,
South Phoenix, 1995 Special Census of Maricopa County**



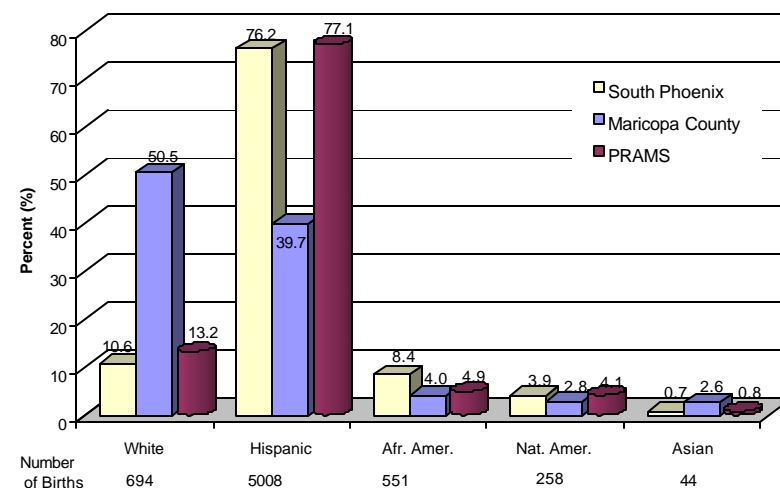
In 1999, there were 6,571 births in the South Phoenix area, a 6.8% increase from the previous year. The births in South Phoenix represented 12.75% of all births in Maricopa County.

Although there were many births in South Phoenix, the number of individuals in any particular category may be small. For example, if women 45 years of age or older in South Phoenix had the same infant mortality rate (IMR) as all other births (e.g., 7/1000) but there were only four live births, there would be no deaths in a group of only four live births. This does not suggest that women 45 years of age and older have an IMR of zero; it means there were not enough births to have at least one death.

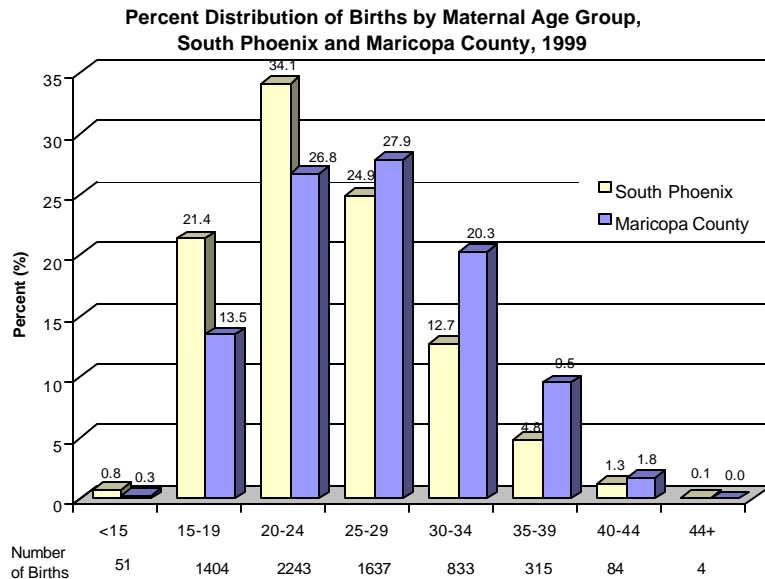
Use caution when examining and interpreting the results because some percentages and/or rates may be based on numbers too small to be meaningful. The numbers used for each graph appear in tables in the “Maricopa County Maternal and Child Health Needs Assessment 2001: Supplemental Data Tables.”

Of the births in South Phoenix, 76.2% were to Hispanic mothers, and 10.6% were to Non-Hispanic White mothers. The maternal racial/ethnic distribution of PRAMS respondents was similar to the maternal racial/ethnic distribution in South Phoenix; However, a higher percentage of Whites and a lower percentage of African Americans responded to PRAMS surveys.

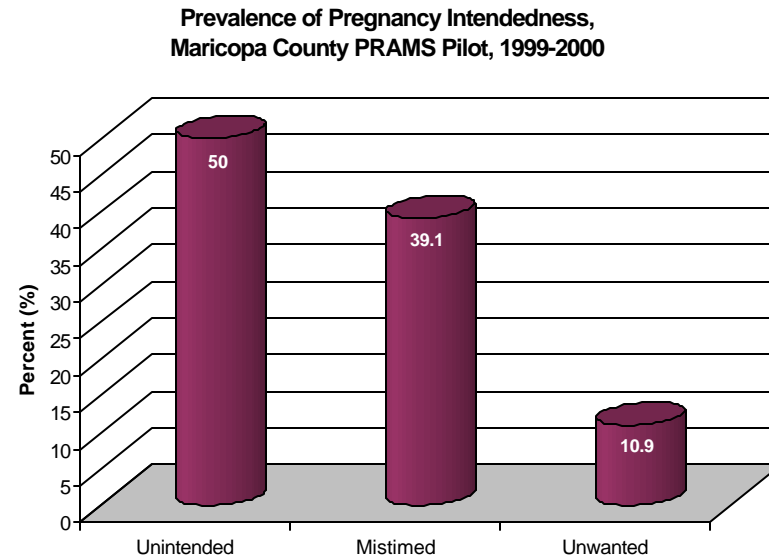
**Percent Distribution of Births by Maternal Race/Ethnicity,
South Phoenix and Maricopa County, 1999**



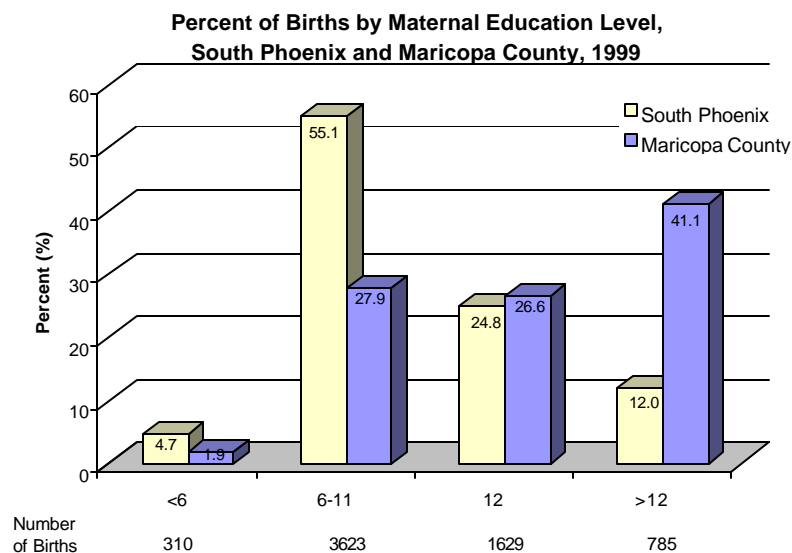
The largest percentage of births in South Phoenix during 1999 were to mothers in the age category 20 to 24 years (34.1%), followed by mothers 25 to 29 years of age (24.9%). Mothers 15 to 19 years of age made up 21.4% of births. Compared to Maricopa County, South Phoenix had a higher percentage of births to younger mothers (less than 25 years of age).



Data from the South Phoenix PRAMS pilot indicate that half of the sampled births in South Phoenix were unintended pregnancies. The two components of an unintended pregnancy include a mistimed pregnancy and an unwanted pregnancy. Mistimed pregnancies are those for which the mother indicated she wanted to be pregnant later (39.1%), while unwanted pregnancies are pregnancies that were not wanted then or at any time in the future (10.9%). Other states conducting PRAMS have reported similar findings for unintended pregnancy¹⁷.



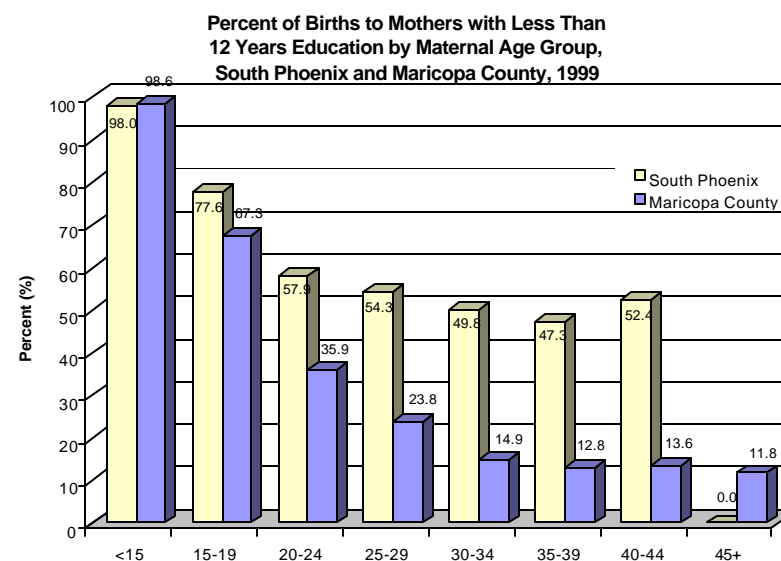
Among mothers delivering during 1999, 59.2% of those in South Phoenix achieved less than 12 years of education compared with 29.8% of those in Maricopa County.

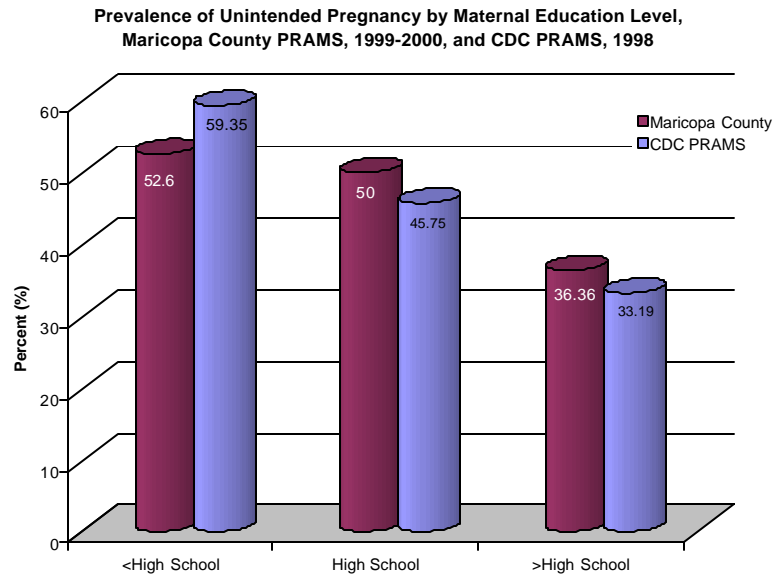


The highest percentage of mothers with less than 12 years of education were of Hispanic origin (67% in 1999), while Asian mothers had the lowest percentage (18.2% in 1999; n=8). The difference between the percent of mothers with less than 12 years of education in South Phoenix and Maricopa County was greatest among Native Americans (21.3 percentage points), followed by Whites (21 percentage points).

Although older mothers were more likely to have graduated from high school, 52.4% of mothers in the 40 to 44 year old age group did not finish high school (n=44).

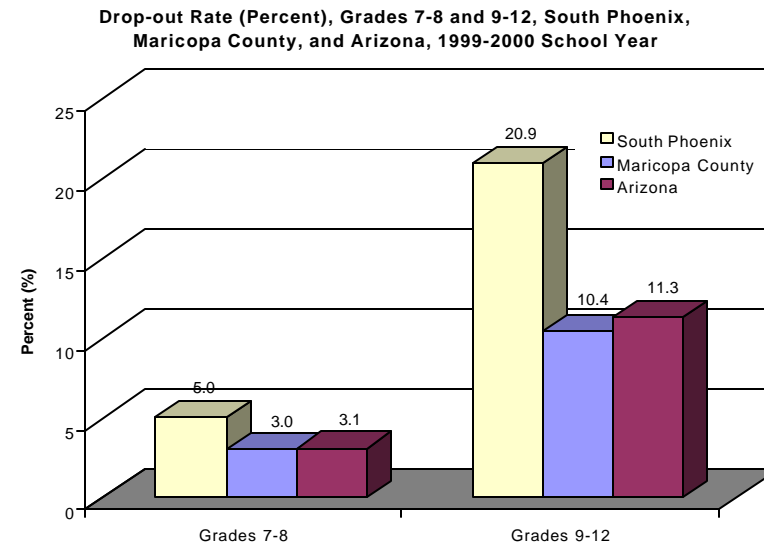
Percent of Births to Mothers with Less Than 12 Years Education by Maternal Race/Ethnicity, South Phoenix and Maricopa County, 1999			
	South Phoenix (%)	Maricopa County (%)	Difference (Percentage Points)
White	31.56	10.61	20.95
Hispanic	66.97	55.86	11.11
Afr. Amer.	38.29	26.53	11.76
Nat. Amer.	54.26	32.94	21.32
Asian	18.18	9.78	8.40
Unknown	3.41	2.49	0.92
Total	59.85	29.80	30.06



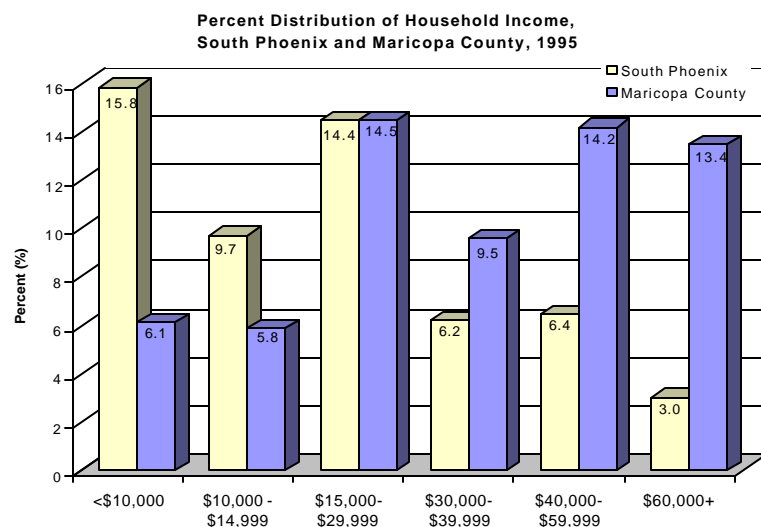


Women with 12 years of education or less were more likely to have had an unintended pregnancy than those with greater than a high school education. This was true both for South Phoenix PRAMS data and PRAMS data from the Centers for Disease Control and Prevention ¹⁸.

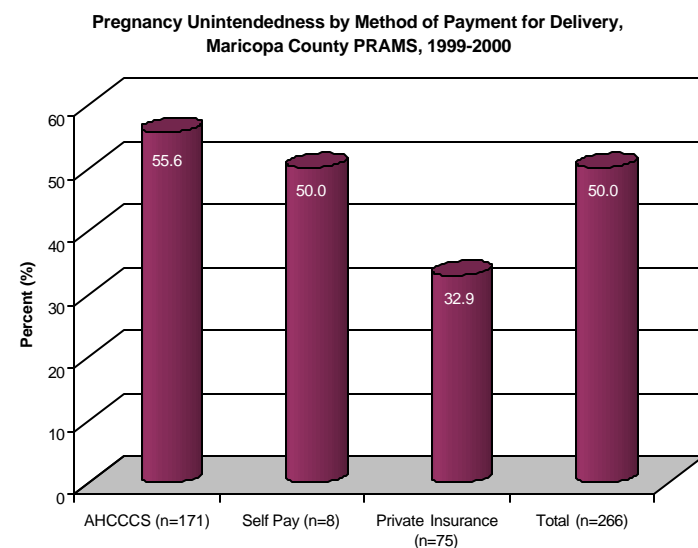
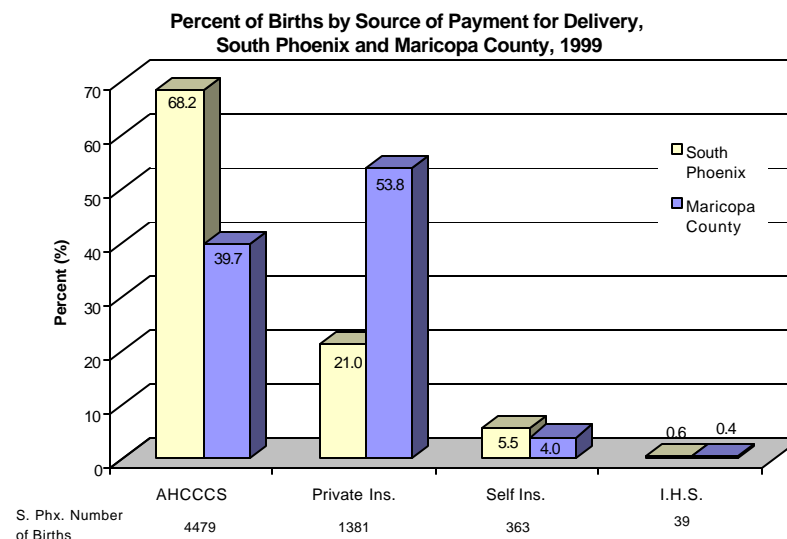
The South Phoenix dropout rate represents the average dropout rate for all schools within the South Phoenix area ¹⁹. South Phoenix had a higher dropout rate than both Maricopa County and Arizona for grades 7 to 8 (5.0%) and grades 9 to 12 (20.9%).



According to the 1995 special census ¹¹, South Phoenix included 61,643 households. Households reporting less than \$10,000 annually comprised the single largest income category in South Phoenix (15.8%). Approximately 14% of both South Phoenix and Maricopa County households reported earnings between \$15,000 and \$29,000 annually. The county as a whole had a larger percentage of households reporting earnings greater than \$30,000 when compared to South Phoenix.

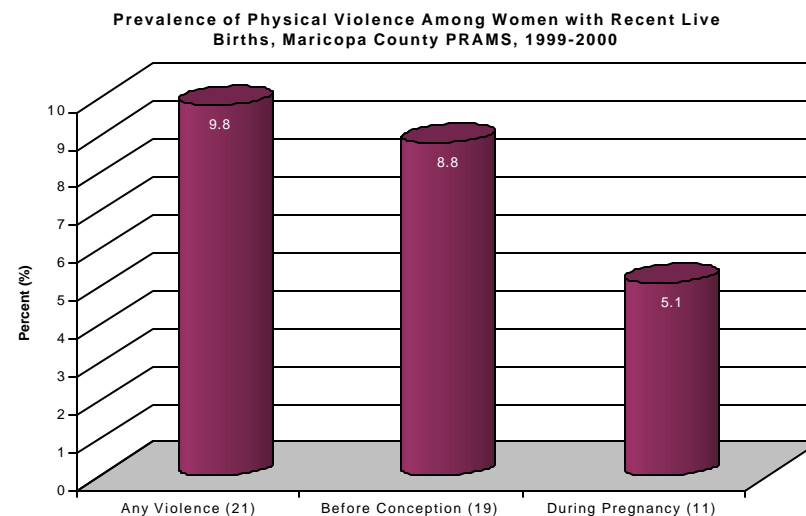
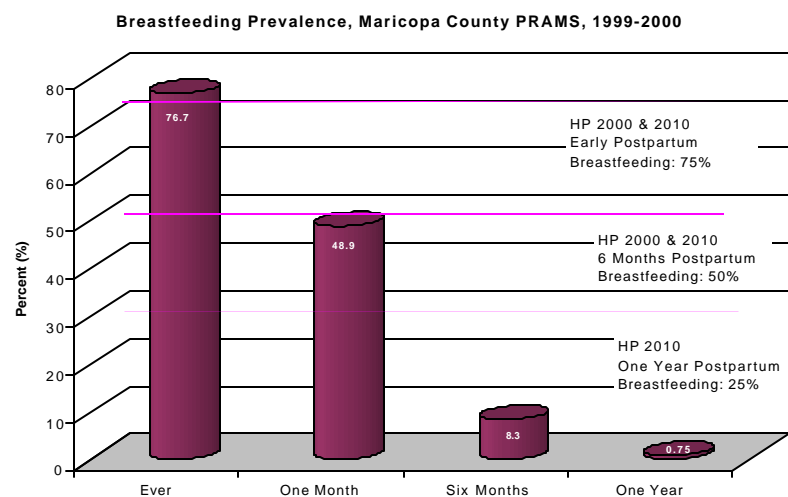


Most births in South Phoenix during 1999 were paid for by the Arizona Health Care Cost Containment System (AHCCCS) (68.2%). During the period 1996 to 1999, there was a decreasing trend in the percentage of births to South Phoenix mothers paid for by AHCCCS. An opposite, increasing, trend was seen in the percentage of births paid for by private insurance and those paid for by self (Data not shown). See Appendix A, Map 4 for the distribution of births paid for by AHCCCS by census tract.



A higher proportion of pregnancies were reported as unintended among females whose deliveries were paid through AHCCCS than among females whose deliveries were paid through any other payment source. See graph on previous page.

South Phoenix is well below the Healthy People objectives^{12,13} for breastfeeding prevalence at six months and one year postpartum.

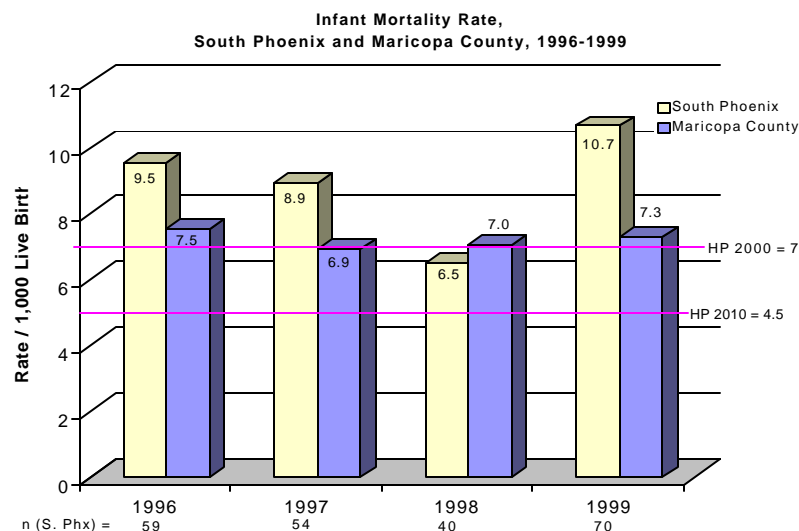


Almost 10% of the women sampled in the PRAMS survey experienced some form of physical violence around or during the time of pregnancy. For approximately 5% of the sample, the violence occurred while the women were pregnant.

Until results from a countywide PRAMS survey are available, findings from the Maricopa County PRAMS pilot cannot be generalized to all women delivering in Maricopa County.

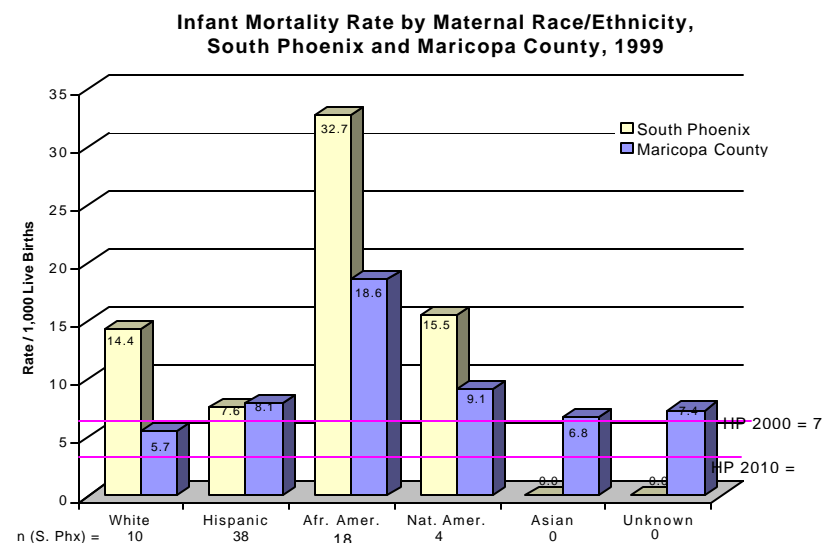
INFANT MORTALITY RATES

There were 223 infant deaths in South Phoenix during the period 1996 to 1999. The average South Phoenix infant mortality rate from 1996 to 1999 was 8.93 annually. The average for this period in Maricopa County was 7.18. Neither the county nor South Phoenix reached the Healthy People 2000 objective of 7 infant deaths per 1,000 live births. A substantial reduction in infant mortality will be necessary to reach the Healthy People 2010 objective of 4.5 infant deaths per 1,000 live births.

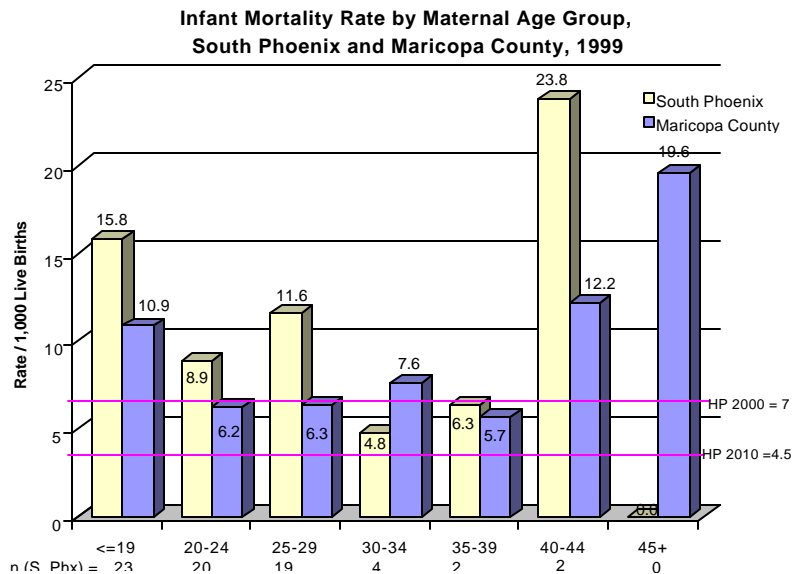


Although there was a declining trend in infant mortality in South Phoenix between 1996 and 1998 with the 1998 IMR of 6.50 reaching the Healthy People 2000 objective, the rate increased to 10.65 in 1999. During the next phase of the PPOR analysis, a detailed examination of the 1999 increase will be carried out. Appendix A, Map 5 shows infant mortality rates in South Phoenix and Maricopa County by census tract.

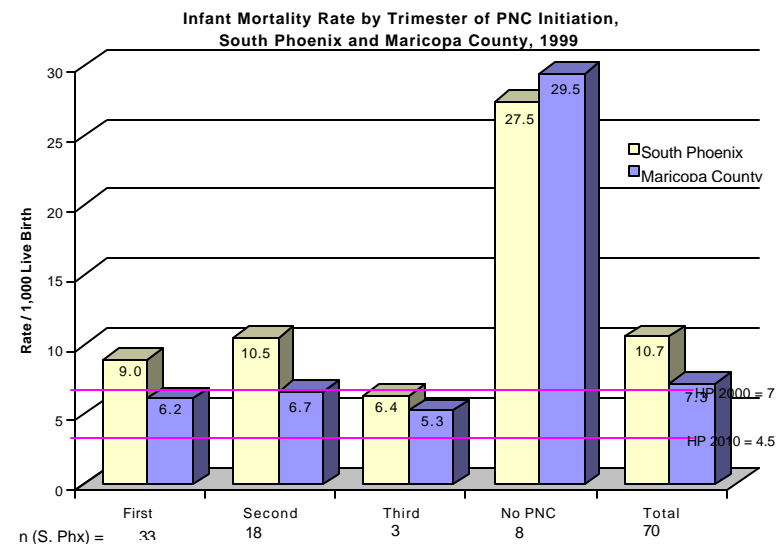
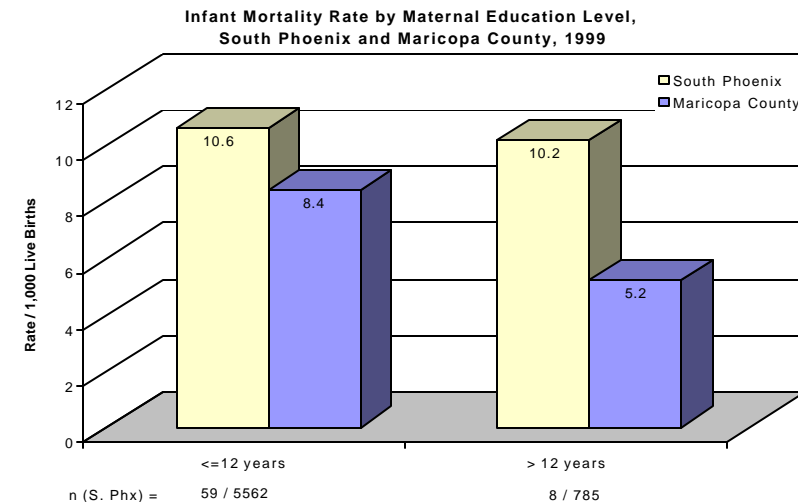
No ethnic/racial groups of mothers residing in South Phoenix during 1999 reached the Healthy People 2000 objective for infant mortality, excepting Asian mothers but there were few births and no deaths in this group. Non-Hispanic White, African American, and Native American mothers residing in South Phoenix had higher IMRs during 1999 than their counterparts countywide. Hispanic mothers, however, have a lower IMR in South Phoenix than countywide.



The infant mortality rates were higher in South Phoenix than Maricopa County for all age groups except among women in the 30 to 34 year old age group. Although the IMR of 23.81 among women between the ages of 40 and 44 in South Phoenix appears high, the numbers of births (84) and deaths (2) were small and, thus, statistically unstable.



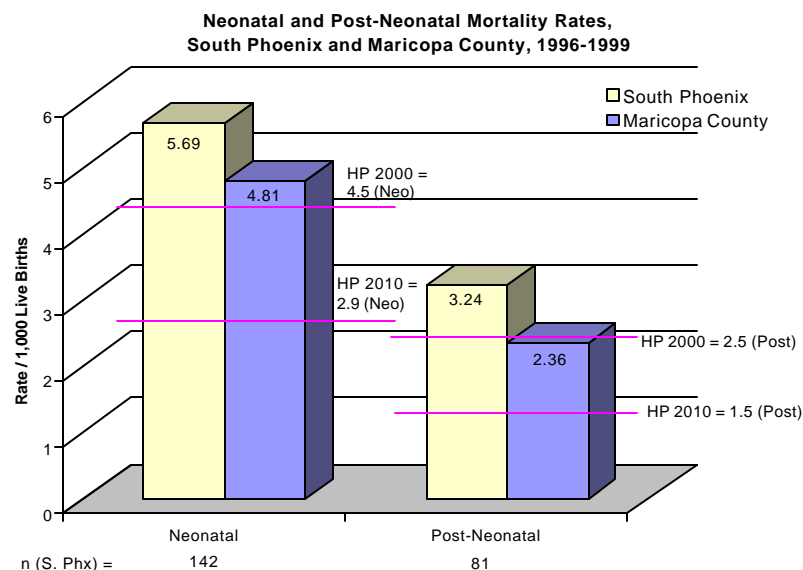
The South Phoenix 1999 IMR for women with a twelfth grade education or less (10.6) was higher than the Maricopa County comparison (8.4). The IMR for women with more than a high school degree (10.2) was also higher than the county rate (5.2).



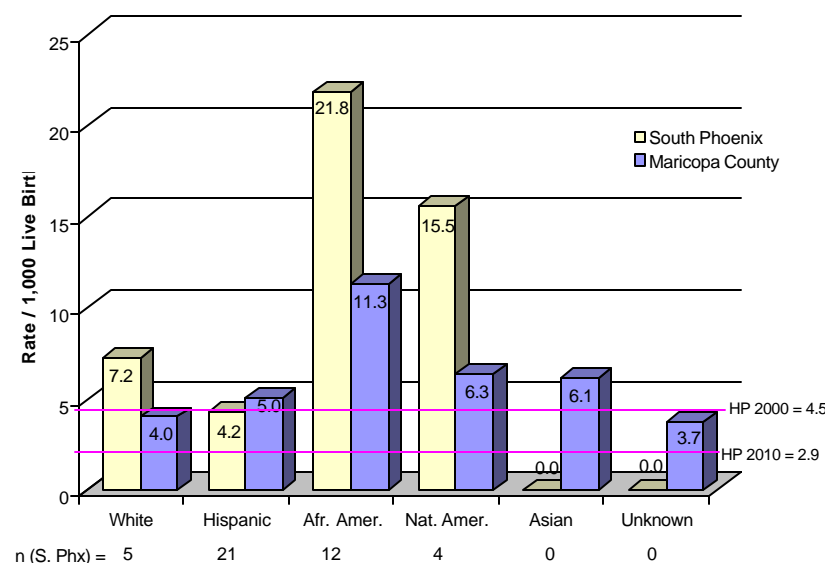
The 1999 IMR in South Phoenix was higher than in Maricopa County for women initiating prenatal care during any trimester of pregnancy. The IMR among women who did not receive prenatal care was high (27.5 per 1,000).

The neonatal mortality rate (NMR; deaths before 28 days of age) from 1996 to 1999 was higher in South Phoenix (5.69) than the county (4.81). South Phoenix reached the Healthy People 2000 objective of less than 4.5 neonatal deaths per 1,000 live births during 1998; however, the objective was not met prior to 1998 or during 1999 (graph not shown).

In 1999, about 40% of the infant deaths in South Phoenix were post-neonatal (28 to 365 days old). This proportion is higher than county and national averages where approximately 1/3 of infant deaths are in the post-neonatal period¹². The post-neonatal mortality rate (PNMR) between 1996 and 1999 was higher in South Phoenix (3.24) than the county (2.36). In South Phoenix, the Healthy People 2000 objective of 2.5 per 1,000 live births was not met during any year (1996-1999). In the county, the Healthy People 2000 objective was met each year (data not shown).

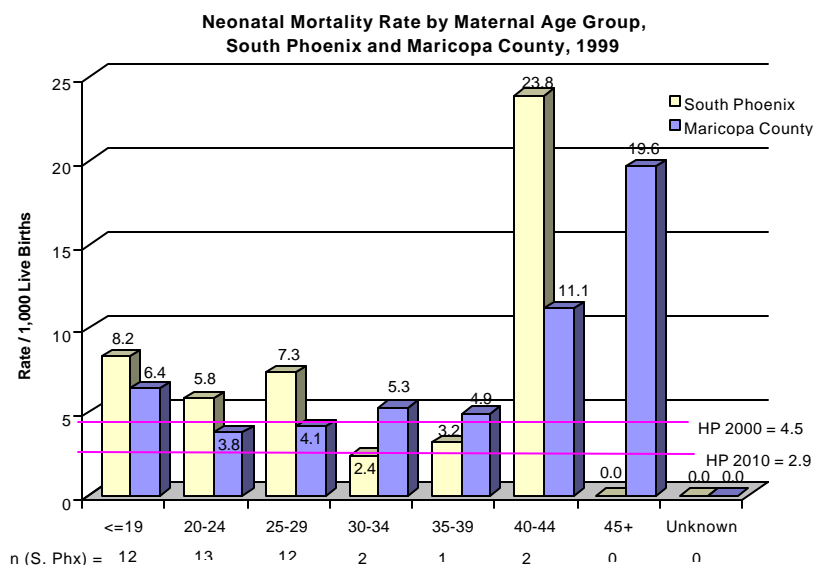


Neonatal Mortality Rate by Maternal Race/Ethnicity, South Phoenix and Maricopa County, 1999



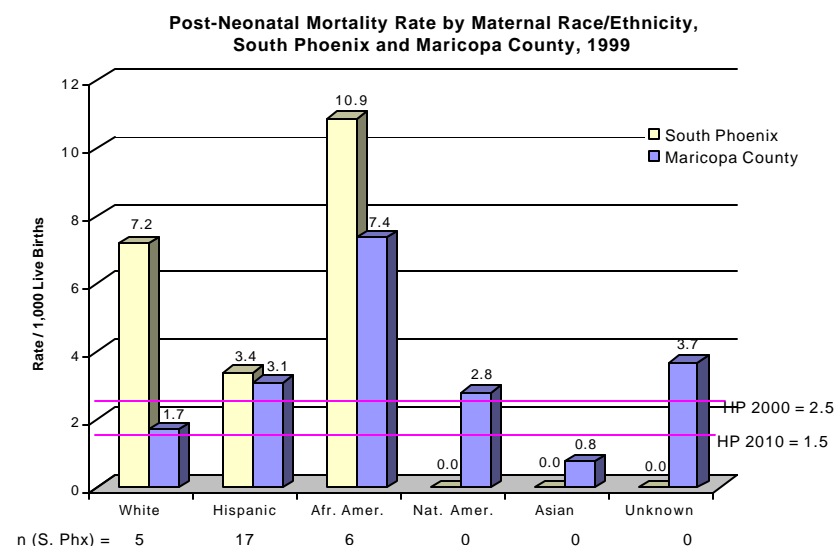
The highest NMRs in South Phoenix were among African Americans (21.8; 12 deaths) and Native Americans (15.5; 4 deaths). Both groups had higher rates in South Phoenix than in the county as a whole.

The lowest NMR for residents of South Phoenix was among Hispanics, reaching the Healthy People 2000 objective. The NMR among Hispanics in South Phoenix was slightly lower than countywide. There were no infant deaths to Asian mothers in South Phoenix during 1999 but there were only 44 births.



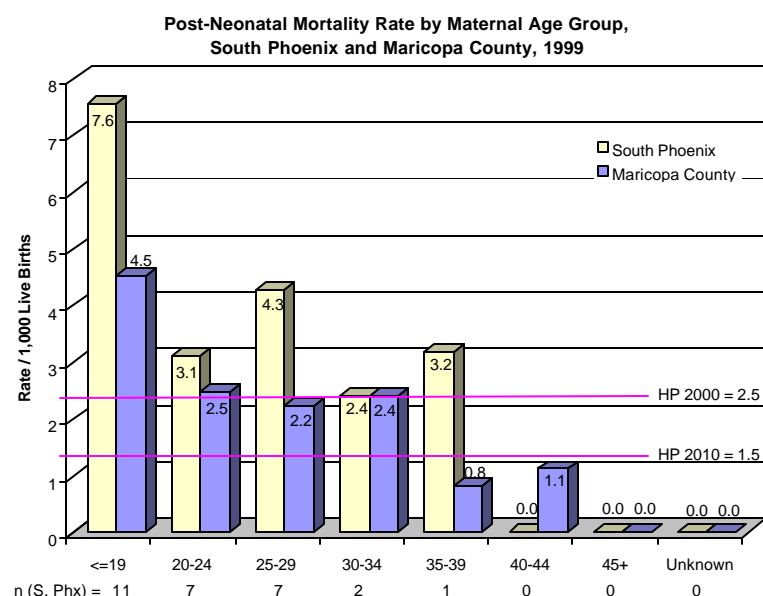
Women 29 years of age and younger who resided in South Phoenix had higher NMR than same aged women countywide. Women 30 to 39 years of age in South Phoenix had lower NMR than women of the same age countywide; However, the numbers are small and the rates unstable for these age groups and for those over age 40.

In South Phoenix, African Americans had a PNMR of 10.9 (6 deaths), which was higher than other racial/ethnic groups in South Phoenix and African Americans countywide (7.36). Non-Hispanic White residents of South Phoenix also had a substantially higher PNMR (7.20; 5 deaths) than those in Maricopa County (1.69).



The PNMR for South Phoenix residents was higher than for Maricopa County residents across all age groups except women aged 40 to 44 (there were no deaths and only 84 births in this age group). The only South Phoenix age group to reach the Healthy People 2000 objective was that of women 30 to 34 years of age.

Teenagers in South Phoenix had a PNMR of 7.56, higher than teenagers in the county (4.52) and other age groups in South Phoenix.

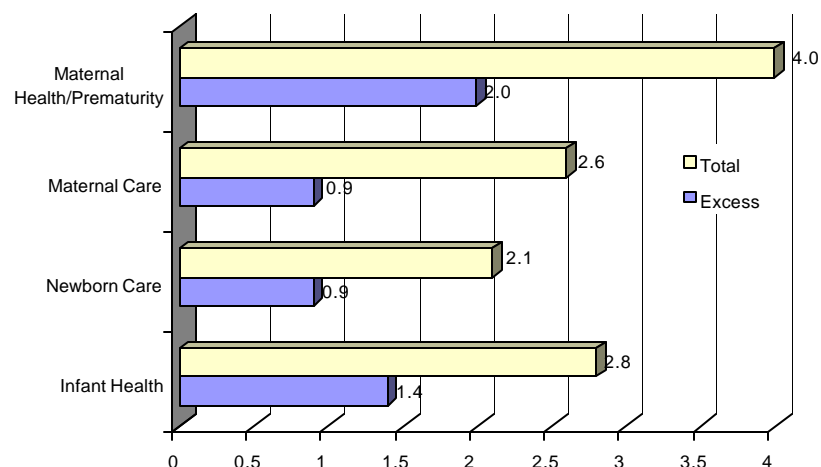


PERINATAL PERIODS OF RISK

The Perinatal Periods of Risk analysis (PPOR) is used to identify excess infant mortality in an area or population by comparing their experience with a reference group. Births, fetal deaths, and infant deaths for South Phoenix for the years 1995 through 1998 were used in this analysis. The reference group comprised Maricopa County White mothers who delivered at 20 or more years of age and had more than 12 years of education. This analysis was presented to community partners in August, 2000.

The feto-infant mortality rate for South Phoenix was separated into several components that affect mortality: maternal health/prematurity, maternal care, newborn care, and infant health. Factors that most commonly affect maternal health include preconceptional health, unintended pregnancy, maternal health behaviors and conditions, infections before and during pregnancy, and previous pregnancy outcomes. Some of the factors affecting maternal care include prenatal care, preconception care, nutrition during pregnancy, infections during pregnancy, early labor, and the appropriate level of perinatal care. Factors affecting newborn care include hospital quality, level of care available, obstetrical and pediatric expertise, neonatal intensive care, and recognition of emergencies. Prevention and diagnosis of infection and injury, recognition of birth defects and developmental anomalies, SIDS prevention, and promotion of breastfeeding can influence infant health.

South Phoenix Feto-Infant Mortality by Periods of Risk, 1995-1998

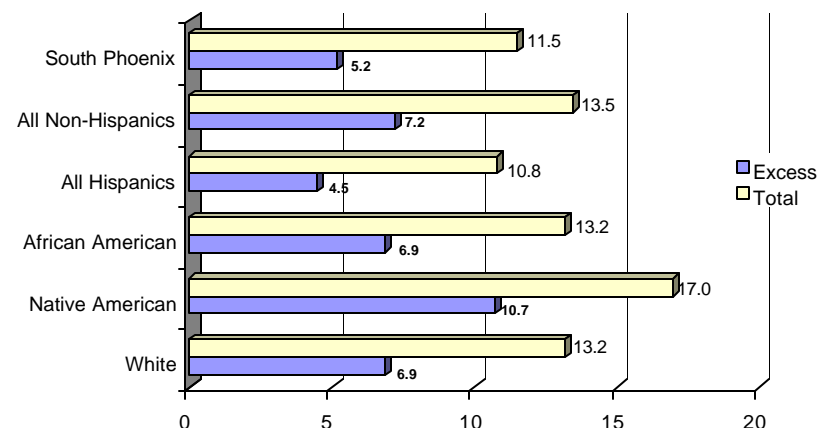


For each component, the feto-infant mortality rate and the part of that rate that was more than expected given the reference group rate (excess) was computed. In South Phoenix, maternal health factors contributed the most to the feto-infant mortality rate. The total feto-infant mortality rate for South Phoenix was 11.5 per 1,000 and maternal health factors accounted for 4/1,000.

In order to determine the racial/ethnic group with the highest level of excess mortality, the periods of risk analysis was stratified by racial/ethnic groups. Native American women in South Phoenix had the highest feto-infant mortality rate as well as the highest excess risk.

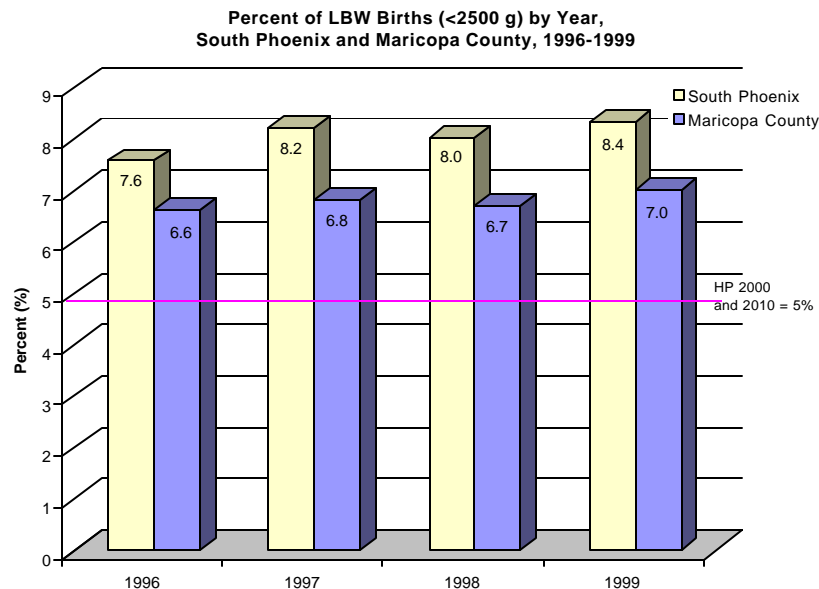
Maternal health was the largest contributor to risk for all groups, except for African Americans where infant health risk was the largest contributor. Native Americans experienced no deaths in the category attributable to maternal care but the number of births was small.

South Phoenix Feto-Infant Mortality by Ethnicity, 1995-1998

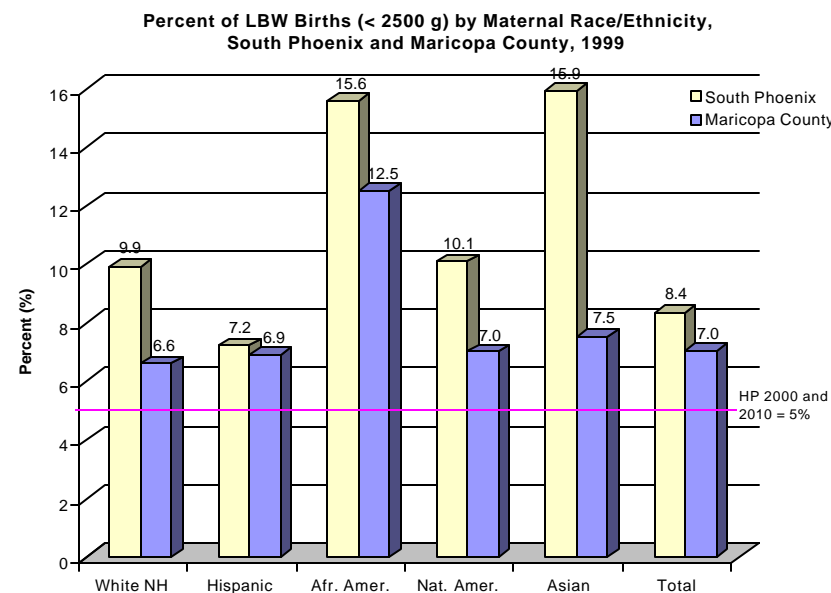


LOW BIRTH WEIGHT AND PRETERM BIRTHS

From 1996 to 1999, an average of 8.1 percent of all births to South Phoenix residents were low birth weight (< 2500 grams). Maricopa County's average was lower, with 6.8 percent of all births being LBW. The percent of LBW births was higher each year from 1996 to 1999 in South Phoenix than countywide. Neither South Phoenix nor the county met the Healthy People 2000 and 2010 objective of 5%. A map of low birth weight by census tract is shown in Appendix A, Map 6.

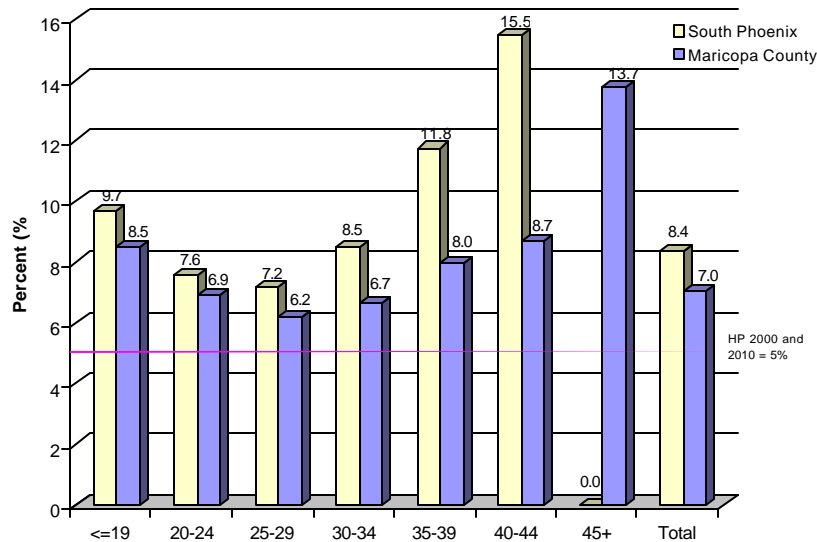


Each racial/ethnic group of women residing in South Phoenix during 1999 had a higher percent of LBW births than their counterparts in the county, with African American and Asian women having the largest percentage of low birth weight births. The 16% low birth weight births for Asians represents 7 LBW births in South Phoenix. No racial/ethnic group in South Phoenix or Maricopa County reached the Healthy People 2000 objective.



A higher percentage of births were LBW across all maternal age groups in South Phoenix compared to Maricopa County. There were only four births and no LBW births to mothers 45 years of age and over during 1999 in South Phoenix.

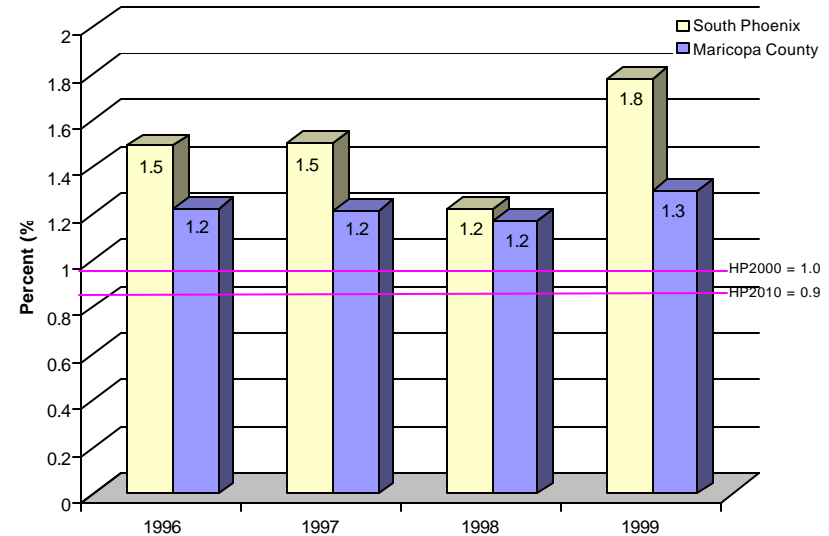
Percent of LBW Births (< 2500 g) by Maternal Age Group, South Phoenix and Maricopa County, 1999



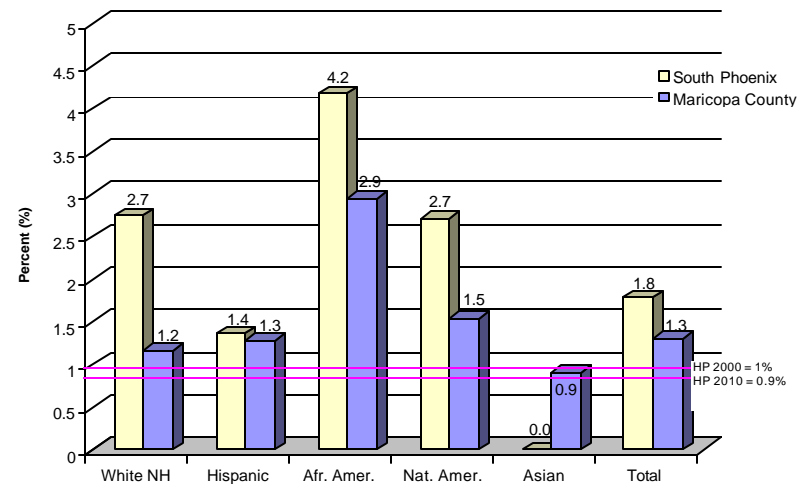
The percent of very low birth weight (VLBW) births (< 1500 grams) was higher each year (1996-1999) in South Phoenix than countywide. Neither South Phoenix nor the county met the Healthy People 2000 objective of 1% VLBW births.

All racial/ethnic groups had a higher percent of VLBW births in South Phoenix than in the county. African Americans had the highest percent of VLBW births in South Phoenix, followed by Whites and Native Americans. Similarly, a higher percentage of VLBW births for all age groups were observed in South Phoenix compared to Maricopa County (data not shown).

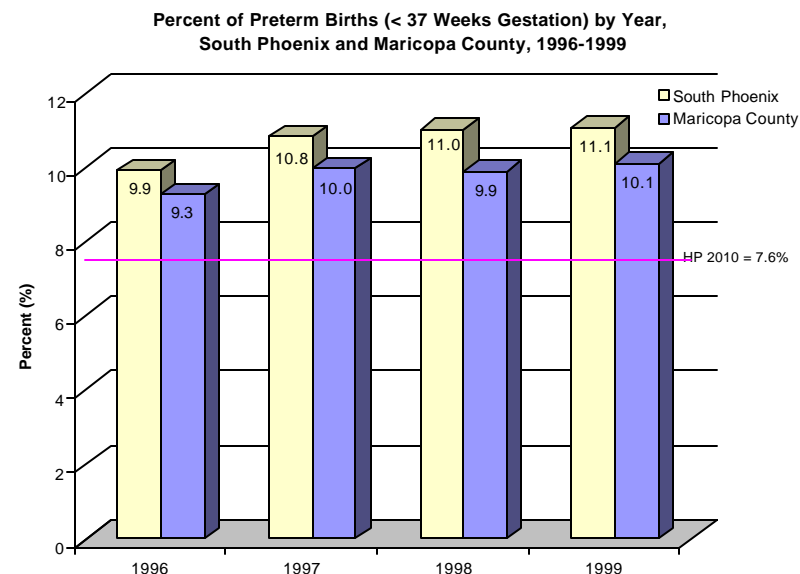
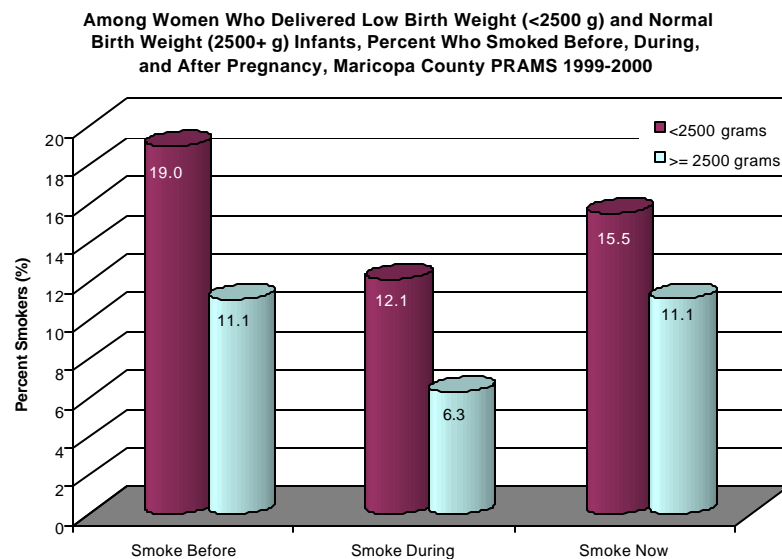
Percent of VLBW Births (<1500 g) by Year, South Phoenix and Maricopa County, 1996-1999



Percent of VLBW Births (< 1500 g) by Maternal Race/Ethnicity, South Phoenix and Maricopa County, 1999



More women delivering low birth weight infants reported smoking during the three months before they were pregnant, the last three months of their pregnancy, and at the time of completing the PRAMS questionnaire (4 to 13 months post-partum), compared to women delivering normal birthweight and heavier infants.

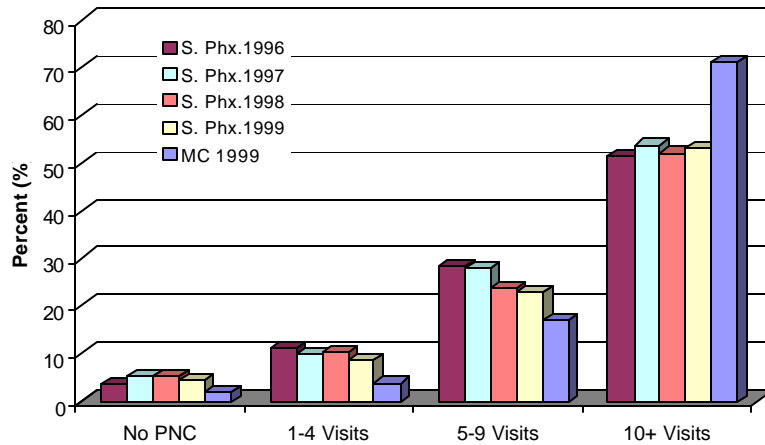


The percent of births that were preterm (< 37 weeks gestation) was higher each year (1996-1999) in South Phoenix than countywide. Neither South Phoenix (average of 10.71%) nor the county (average of 9.80%) reached the Healthy People 2010 goal of 7.6%.

PRENATAL CARE

Women in South Phoenix were less likely to have received 10 or more prenatal care visits compared to women in all of Maricopa County.

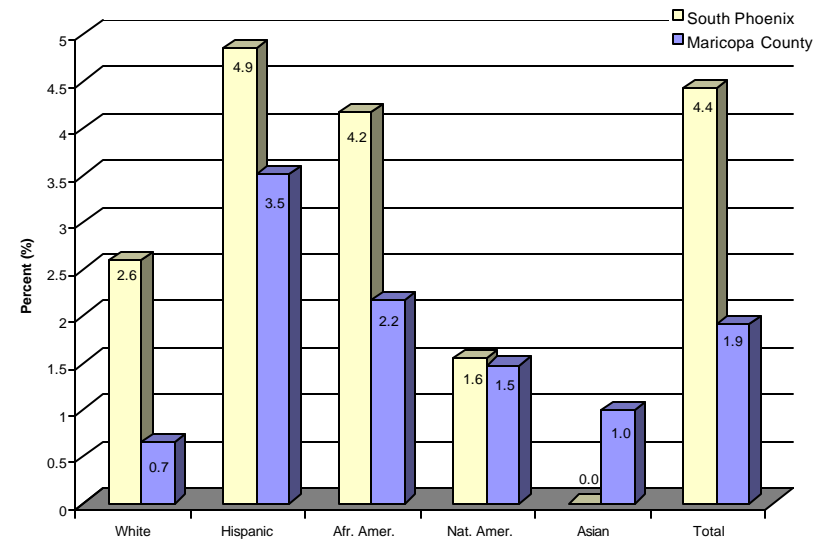
**Percent of Mothers Receiving PNC by Number of Visits,
South Phoenix 1996-1999 and MC 1999**



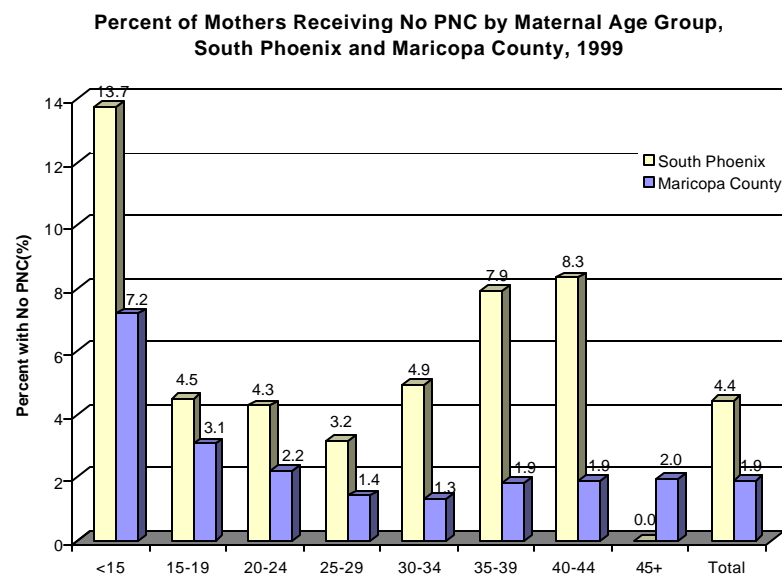
Appendix A, Map 7 displays the percent of mothers receiving no prenatal care by census tract.

During the years 1996-1999, African American mothers had the highest prevalence of mothers receiving no prenatal care in South Phoenix (5.2%, data not shown). In 1999, however, Hispanic mothers in South Phoenix had the highest percentage of women receiving no prenatal care (4.9%), followed by African American mothers (4.2%) and White mothers (2.6%). Over the four years, all racial and ethnic groups in South Phoenix were above the county average for the percent of mothers receiving no prenatal care.

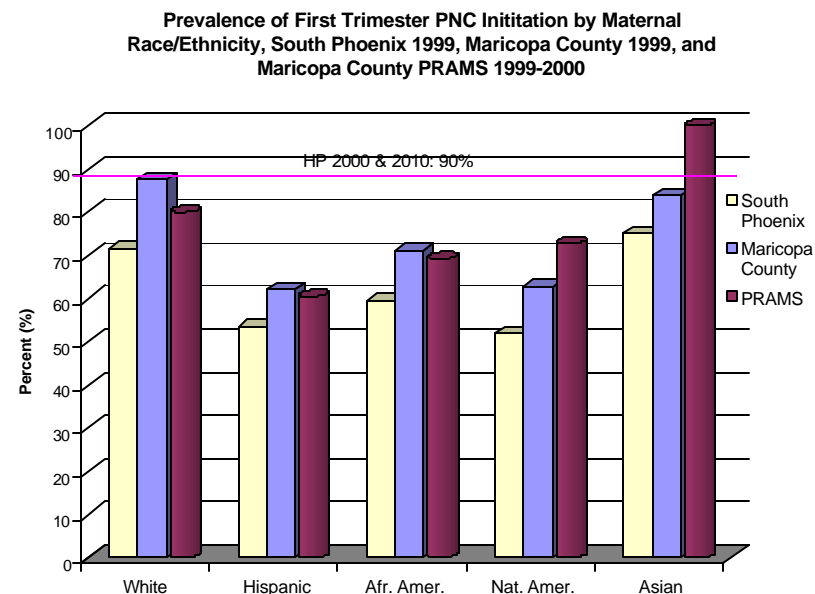
**Percent of Mothers Receiving No PNC by Maternal Race/Ethnicity,
South Phoenix and Maricopa County, 1999**



When looking at no prenatal care across maternal age groups, a reversed 'J' curve shows the tendency of the younger and older age groups to have a higher percentage of women receiving no prenatal care. In South Phoenix during 1999, women in all age categories had a higher percentage of women receiving no prenatal care than for the county (see the graph on the next page).



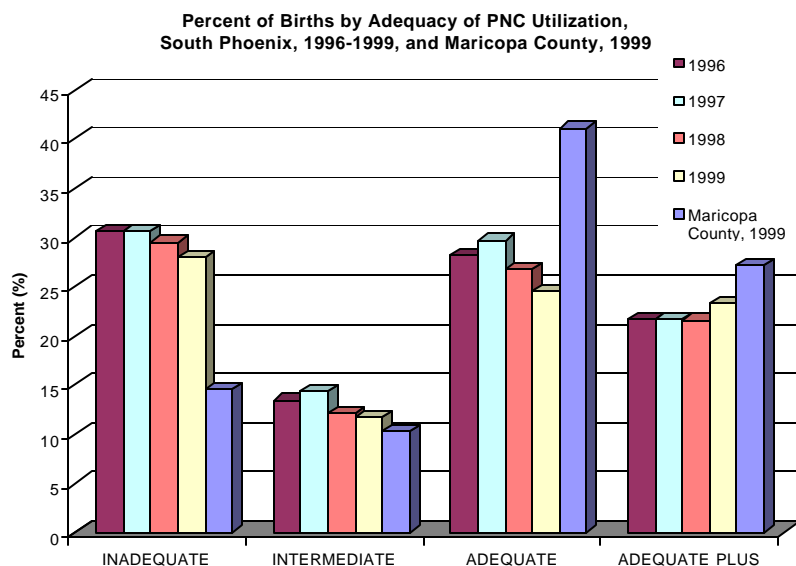
None of the racial or ethnic groups in South Phoenix in 1999 met the Healthy People 2000 or 2010 objective for the percent of women initiating prenatal care in the first trimester, according to birth certificate data. In South Phoenix, Hispanics and Native Americans had the lowest percentage of women initiating prenatal care in the first trimester, followed by Blacks/African Americans. Overall, PRAMS respondents had a higher percentage of mothers initiating first trimester prenatal care compared to all live births in South Phoenix (birth certificate data). This may be a result of self-selection bias.



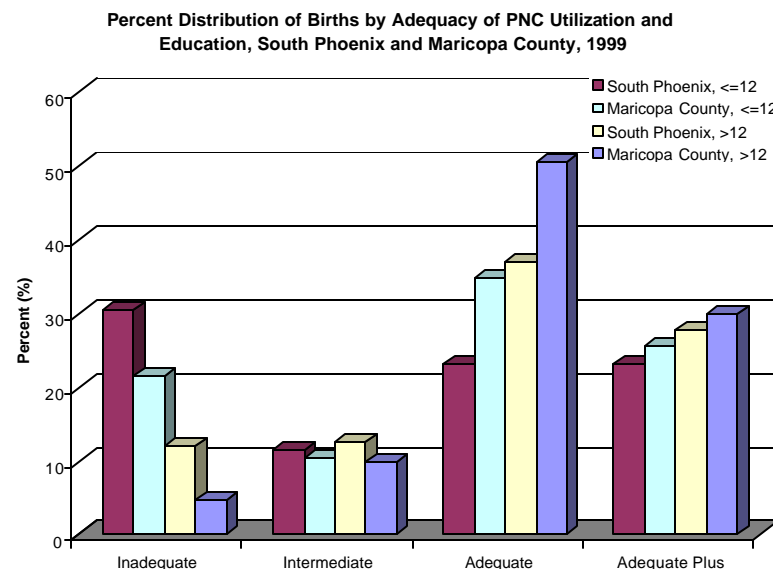
Women of all ages in South Phoenix were less likely to receive first trimester prenatal care when compared to Maricopa County as a whole. In 1999, none of the age groups met the Healthy People 2000 or 2010 objective for first trimester prenatal care initiation of 90% (data not shown).

Adequacy of prenatal care utilization (APNCU) among expectant mothers was determined using the APNCU index⁹. This index characterizes the adequacy of PNC by using the month of initiation and appropriate number of visits depending on the month of PNC initiation and gestational age at birth. The APNCU index does not assess the quality of PNC and does not adjust for risk conditions of the expectant mother. It only assesses PNC utilization.

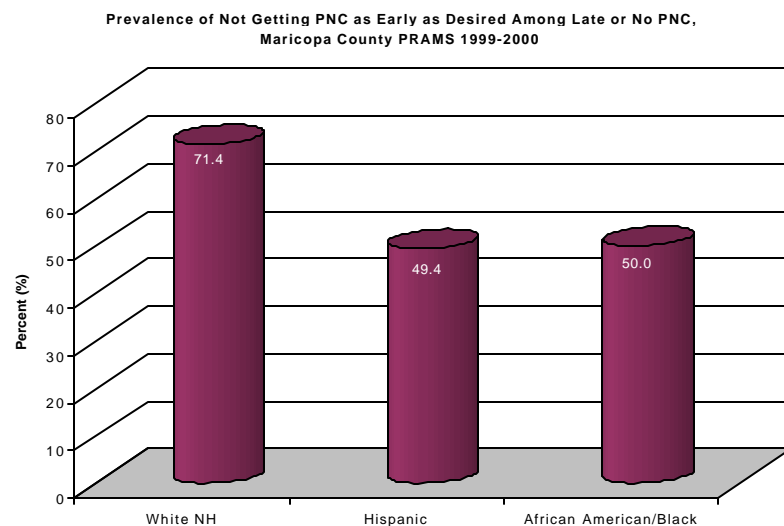
The percent of mothers with inadequate and intermediate PNC utilization in South Phoenix showed a decreasing trend from 1997 to 1999 (27.99% and 11.67% in 1999), as did the percent of mothers with adequate PNC utilization (24.49% in 1999). The percent of mothers with adequate-plus PNC utilization in 1999 increased 15.36% from 1998 (23.31% in 1999).



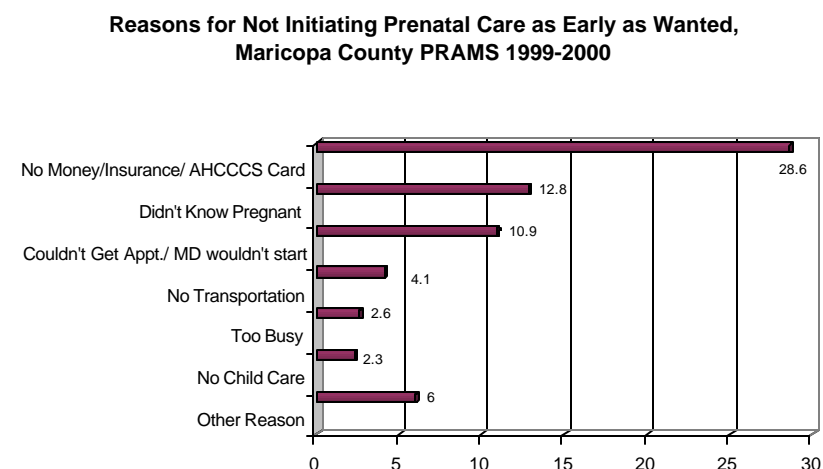
In 1999, mothers in South Phoenix with 12 years of education or less were more likely to have utilized an inadequate level of PNC (30.56%); 21.46% of mothers in the county with 12 years of education or less utilized an inadequate level of PNC. The highest percentages of mothers who adequately utilized PNC were among mothers in both South Phoenix and Maricopa County with more than 12 years of education (36.94% and 50.65%, respectively). Overall, educated mothers (more than 12 years of education) in Maricopa County had better PNC utilization than educated mothers in South Phoenix.



Among those women who did not receive first trimester prenatal care, 71% of the White PRAMS respondents indicated they didn't receive prenatal care as early as they wanted, while approximately 50% of both Hispanic and African American mothers indicated they didn't receive prenatal care as early as they wanted.

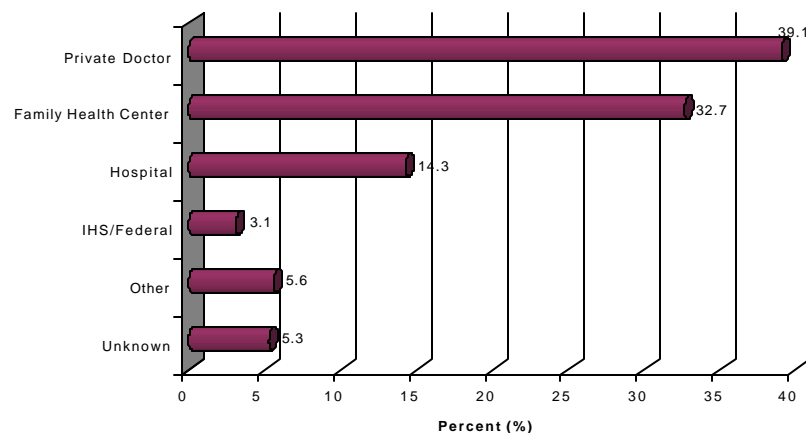


The most common reason cited by PRAMS respondents for not getting prenatal care as early as desired was that the mother did not have enough money or insurance, or an AHCCCS card to pay for her prenatal care visits. Other reasons cited, in descending order of frequency, include, 1) the mother didn't know she was pregnant, 2) she couldn't get an appointment any earlier or her doctor/health plan would not start care any earlier, 3) she had no means of transportation, 4) she had too many other things going on, and 5) she had no one to watch her children.



Mothers responding to the PRAMS survey reported private doctors as the most common source of prenatal care, followed by family health centers, hospitals, and Indian Health Services (IHS) or Armed services. See graph on next page.

Distribution of Where Mother Went for Most Prenatal Care Visits,
Maricopa County PRAMS 1999-2000

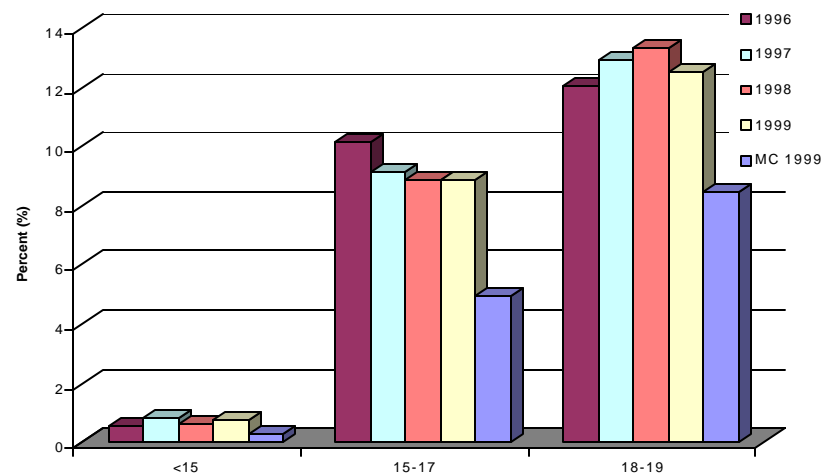


TEEN BIRTHS

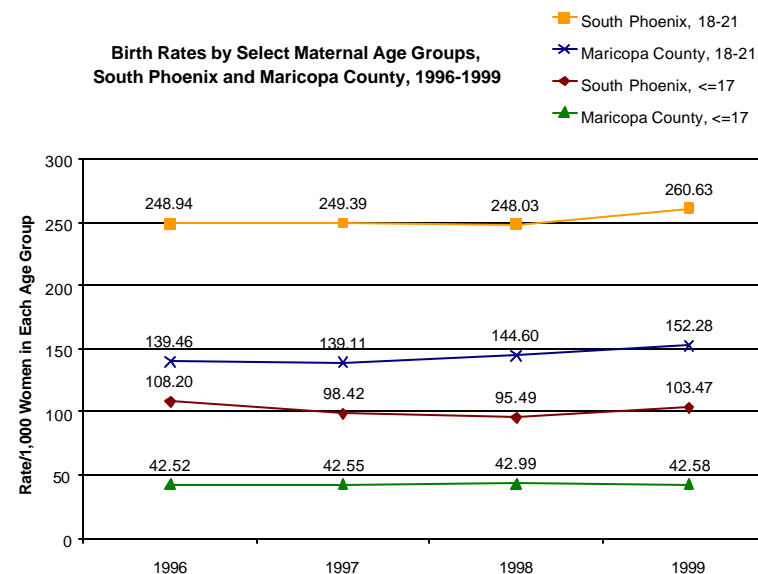
In 1999, 22% of all births in South Phoenix were to women 19 years of age or younger; 0.78% were to women 15 years of age or younger (51 births). There was a decreasing trend across years in the percent of births to mothers 15 to 17 years of age. See Appendix A, Map 8 for teen birth rates by census tract.

Teen birth rates were calculated for females 17 years of age and younger and females 18 to 21 years of age, because these were the only young female population age groups available by census tract from the 1995 special census of Maricopa County¹¹. Birth rates for South Phoenix teens under the age of 17 were higher than the rates for teens in the county during the period 1996 to 1999. There was a net increase in birth rates for both geographic areas and both age groups, except women 17 years of age and younger in South Phoenix, whose birth rate decreased from 108 in 1996 to 103 in 1999.

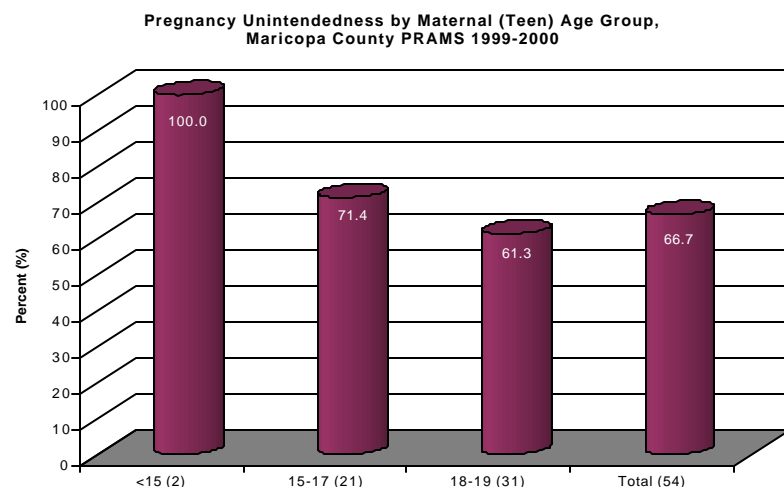
Percent of Births by Teen Age Group,
South Phoenix 1996-1999, Maricopa County 1999



Birth Rates by Select Maternal Age Groups,
South Phoenix and Maricopa County, 1996-1999

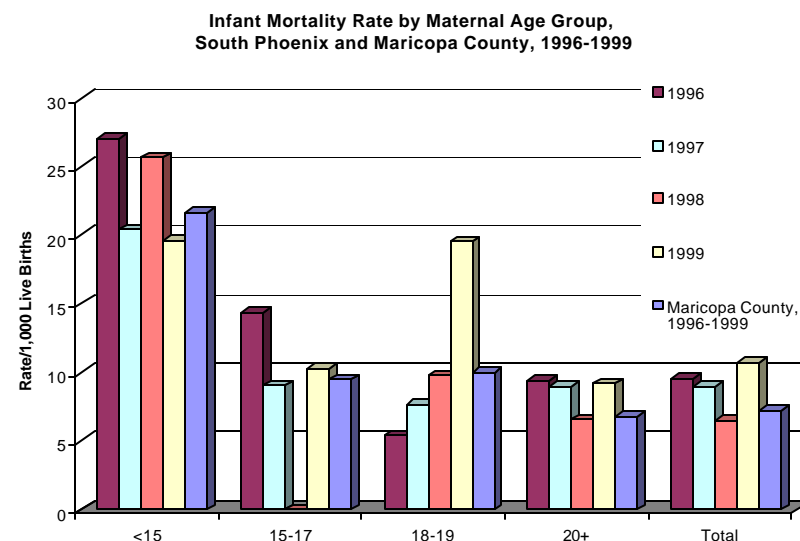
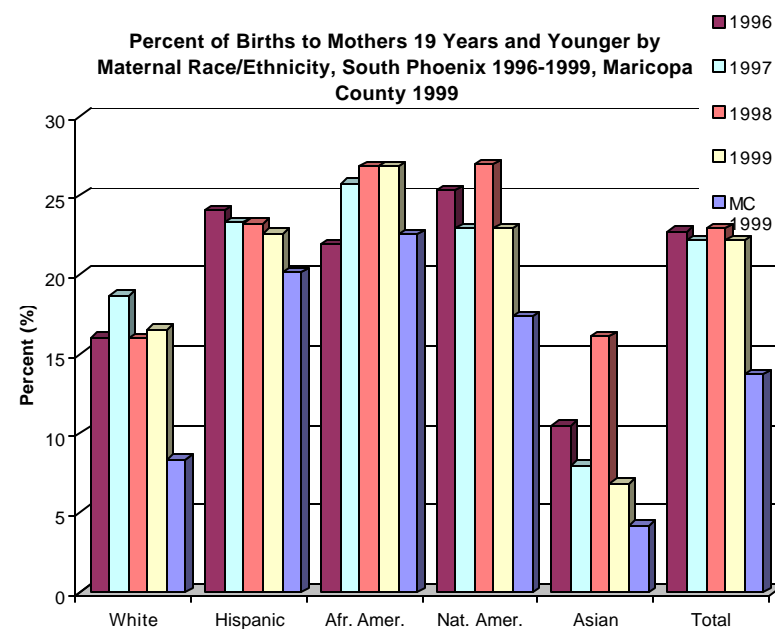


The majority of teenage mothers, approximately 67 percent, did not intend to get pregnant at the time. Among teens 15-17 years of age, 71.43 of the pregnancies were unintended and 61.29 percent of the pregnancies to mothers aged 18-19 were unintended.



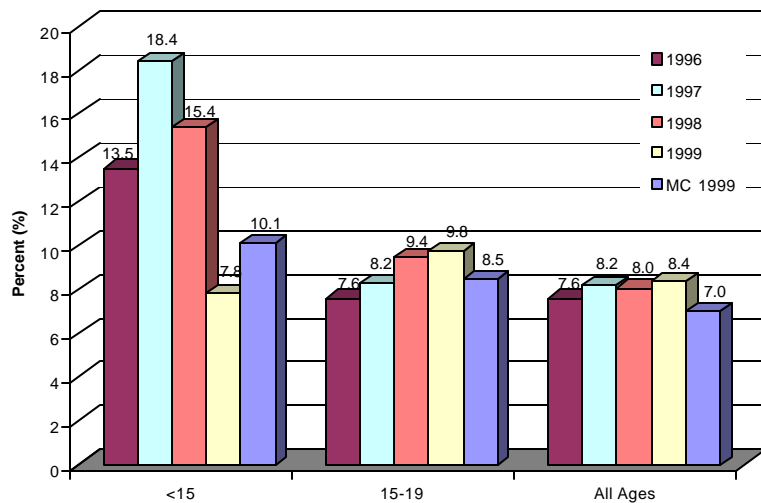
In South Phoenix during 1999, teenage mothers made up 26.86% of births to African Americans, 22.87% to Native Americans, 22.59% to Hispanics, 16.57% to Whites, and 6.82% to Asians.

There was generally a higher infant mortality rate (IMR) in South Phoenix than countywide for most age groups. One exception was mothers aged 15 to 17 years; in South Phoenix the IMR was 8.65 per 1,000 live births (1996-1999 average; 20 infant deaths) compared with 9.44 per 1,000 in Maricopa County (1996-1999 average; 97 infant deaths). The highest IMR among teens was to mothers under 15 years of age (22.73 infant deaths per 1,000 live births) in South Phoenix.



From 1996 to 1999, 21.94% of all births were to mothers 15 to 19 years of age. Teenage mothers had a disproportionately high percentage of LBW births (29.38%).

Percent of LBW Births (<2500 g) by Maternal (Teen) Age Group, South Phoenix 1996-1999, Maricopa County 1999

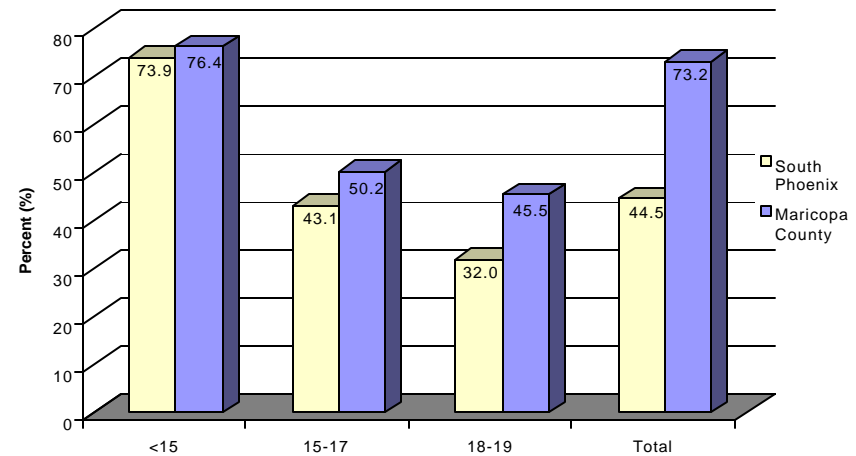


During 1996 to 1999, 4.51% of mothers 19 years of age and younger who gave birth in South Phoenix did not receive prenatal care (PNC). Only 52.63% of South Phoenix teen mothers received PNC during the first trimester of pregnancy. A larger percentage of mothers 20 years of age and older began PNC during the first trimester (58.12%)

All births were dichotomized into two categories: delivered to a mother with an age-appropriate education level or not¹⁰. An age-appropriate education level for an 11 year old was fourth grade (or higher) because the majority of people who are 11 years old are in fourth or fifth grade. The age-appropriate education level increased by one year

Prenatal Care Utilization Among Teen Mothers in South Phoenix, 1996-1999				
	No PNC		Began PNC during First Trimester	
	n	%	n	%
<15	18	10.23	62	35.23
15-19	237	4.33	2914	53.18
All Teens	255	4.51	2976	52.63
20+	907	4.70	11219	58.12

Percent of Births to Mothers with an Age-Appropriate Educational Level by Maternal Age, South Phoenix and Maricopa County, 1996-1999

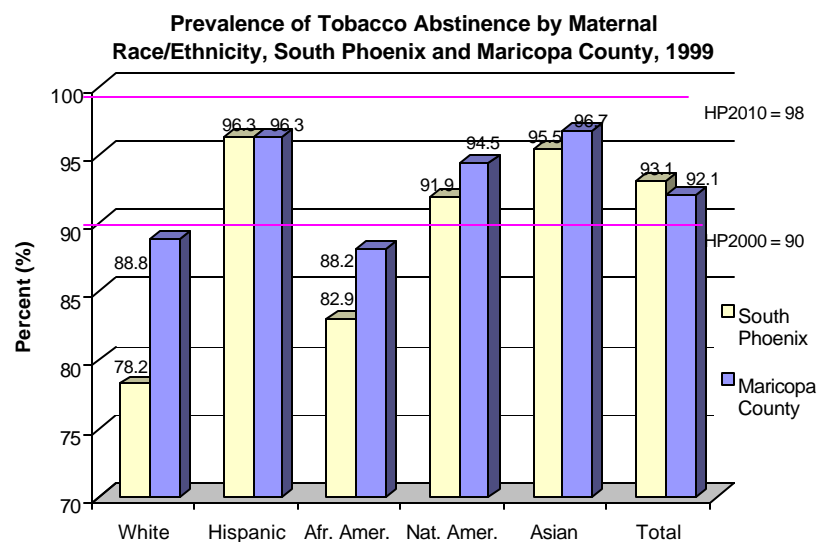


for each year of age increase, such that the appropriate education level for mothers 18 or more years of age was twelfth grade or higher⁵. Among teen age groups, mothers 15 years of age and younger had the highest percentage of achieving an age-appropriate education level in both areas.

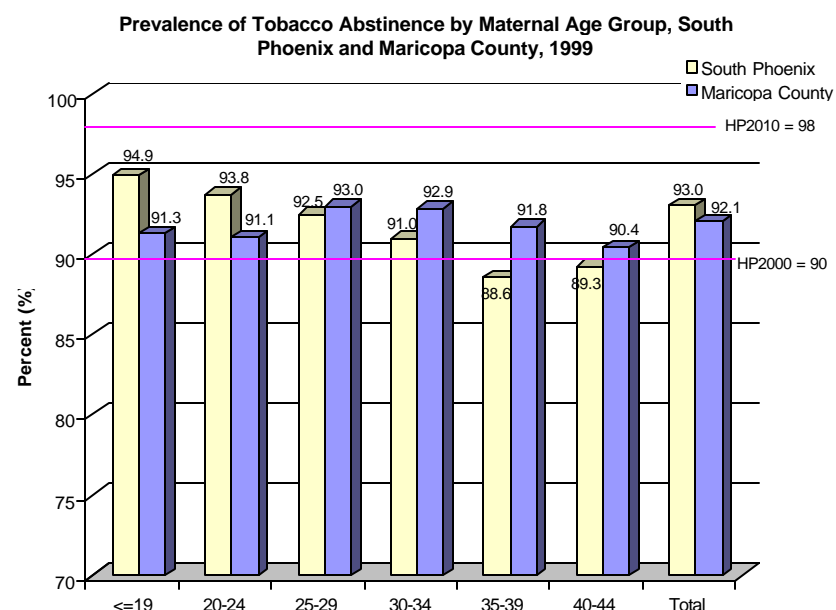
SUBSTANCE USE

More women residing in South Phoenix (93%) abstained from tobacco use during pregnancy in 1999 compared with women in Maricopa County (92.06%). South Phoenix Hispanics accounted for this result. All other racial/ethnic groups residing in South Phoenix used more tobacco during pregnancy than their counterparts countywide.

Hispanics, Native Americans, and Asians in both South Phoenix and Maricopa County reached the Healthy People 2000 goal of 90 percent tobacco abstinence during pregnancy. No racial/ethnic groups in residing in South Phoenix or Maricopa County reached the Healthy People 2010 objective of 98 percent abstinence.

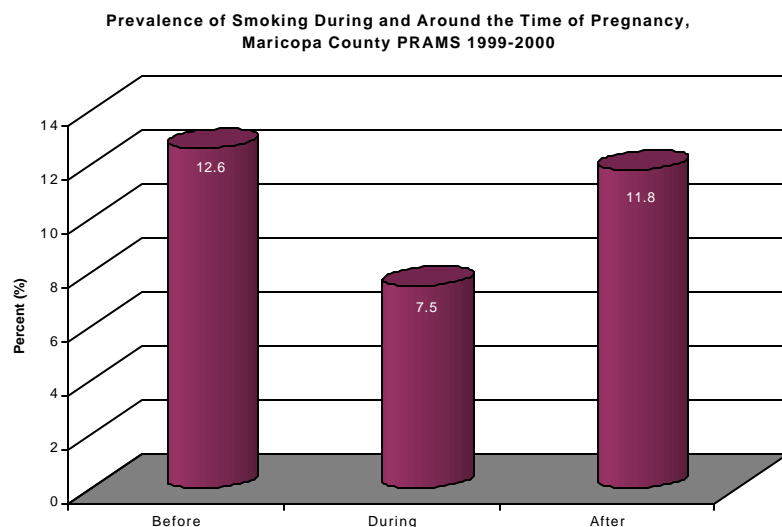


South Phoenix women under the age of 24 abstained from tobacco use during pregnancy more than same age women in the county. The older age groups in South Phoenix abstained less compared with same age women in the county.



See Appendix A, Map 9 for tobacco abstinence during pregnancy by census tract.

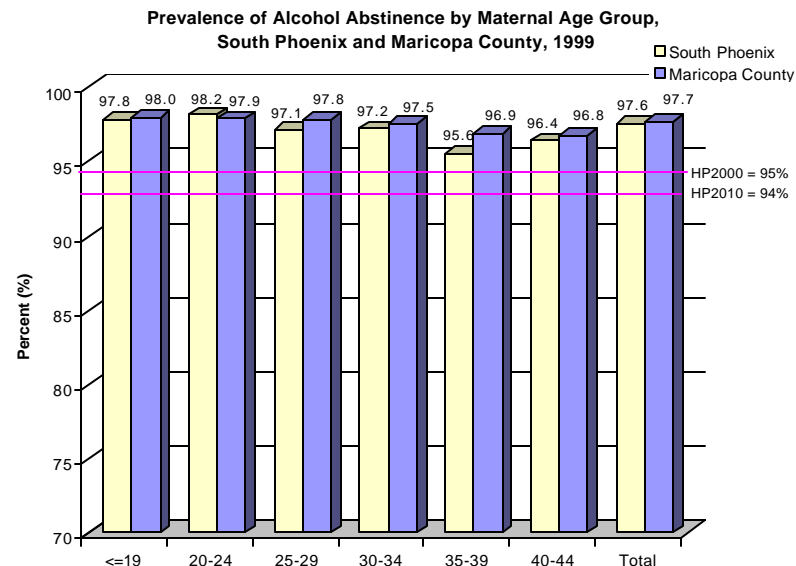
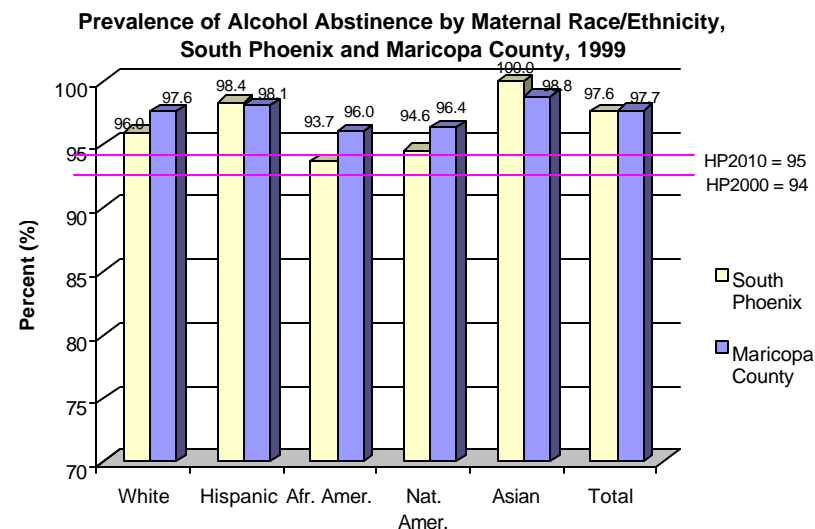
Before pregnancy, 12.6% of South Phoenix women smoked cigarettes and 11.8% smoked after delivery. While some women quit smoking during pregnancy, 7.5% continued to smoke during their pregnancy.



More than 95% of South Phoenix and Maricopa County residents abstained from drinking alcohol during pregnancy in 1999, reaching the Healthy People 2010 objective. See Appendix A, Map 10 for the distribution of alcohol abstinence during pregnancy.

African Americans residing in South Phoenix did not reach the 2010 or 2000 goal with approximately 93 percent abstaining from alcohol while pregnant.

All age groups in both South Phoenix and Maricopa County reached the Healthy People 2010 objective of .95% abstinence from alcohol during pregnancy.



Unintended pregnancies include both mistimed pregnancies (women who want to become pregnant but not at the current time) and unwanted pregnancies (women who did not want to become pregnant now or in the future).

Almost 70% of the women who drank alcohol during their pregnancy had an unintended pregnancy. Approximately half of the women who smoked cigarettes during pregnancy had an unintended pregnancy.

